PART B - FEE(S) TRANSMITTAL

MAR 1 4 2005 🕏	this form, together wi		or <u>F</u>	Commiss P.O. Box Alexands ax (703) 746	sioner fo 1450 ria, Virg -4000	or Patents ginia 22313-1450	
INSTRUCTIONS This for appropriate the formation of the propriate the formation of the propriate the	orm should be used for transcrespondence including the below or directed otherwise ons.	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and P rders and notif a) specifying a	UBLICATION FE ication of maintena new correspondence	E (if requ nce fees v ce address;	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
21363 CHRISTOPHER 24840 HARPER ST. CLAIR SHOP	CE ADDRESS (Note: Use Block 1 for 7590 12/14/2004 R. P. MAIORANA, P. CRES, MI 48080	any change of address)		Note: A cer Fee(s) Trans papers. Each have its own I hereby cer States Posta addressed tr	tificate of smittal. The additional certificate Certify that the I Service to the Mai	mailing can only be used fis certificate cannot be used all paper, such as an assignme of mailing or transmission. rtificate of Mailing or Transisted before the before the with sufficient postage for find the stop ISSUE FEE address	or domestic mailings of the for any other accompanying ent or formal drawing, must smission g deposited with the United states mail in an envelope above, or being facsimile
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1 FC:1501	C:1501 1400.00 OP			Marc	m	Dimbar 2005	(Signature) (Date)
APPLICATION NO.	FILING DATE		FIRST NAMED	INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/915,794 TITLE OF INVENTION: ABUS CONSTANT	07/26/2001 ARCHITECTURE THAT C	ONVERTS A HAI	Gabrie		DUPLEX	0325.00468 BUS WHILE KEEPING TH	7469 HE BANDWIDTH OF THE
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION	FEE	TOTAL FEE(S) DUE	DATE DUE
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EXAMINER		ART UNIT		CLASS-SUBCL.	ASS]	
LEFKOWITZ, SUMATI		2112	2112 710-106000				
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3. ASSIGNEE NAME ANI	D RESIDENCE DATA TO B	E PRINTED ON 1	THE PATENT	(print or type)			
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appe T a substitute fo	ar on the patent. If	an assign	ee is identified below, the d	locument has been filed fo
(A) NAME OF ASSIGN	-			E: (CITY and STAT		UNTRY)	
	Semiconducto			Jose, CA			
Please check the appropriat	e assignee category or catego	ries (will not be pr	inted on the pa	tent) : 📮 Individ	ual 🖾 C	orporation or other private gr	oup entity Government
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a. Applicant claims S	s (from status indicated above	37 CFR 1.27.	☐ b. Applica	nt is no longer clain	ning SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).
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Typed or printed name _	Christophe	r P. Maio	orana	R	egistration	No. 42,829	
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